SOM Occupational Health Awards 2025 Closes 7th November HR professionals underestimate role of OH in employee wellbeing SOM West Midlands Regional Group - Winter Dinner and Networking Evening in November Not Looking Back: From Military Nurse to OH Nurse

# Swm Supporting occupational health

### **AUTUMN MAGAZINE 2025**



Pictured right: SOM 90th Anniversary Gala Dinner in Londo

Pictured left: SOM Workplace VIsit to Bremont Watch Manufacturing Centre

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### Introduction



Professor Neil Greenberg, SOM President

Since taking up the role of President of SOM, life has been satisfyingly busy! In support of my aim to promote the benefits of organisations having access to occupational health (OH) advice, I have met with the Chief Medical Officer (CMO), the Department of Work and Pensions (DWP) and helped prepare the Society's response to the Mayfield review. Working with our sister organisations, including the Faculty, the National School and the Council for Work and Health, we have put forward a proposal for universal access to Work and Health advice which the CMO and DWP seem supportive of. SOM has also engaged with a new PR/comms company called Atalanta who we very much hope will help us to promote the great work that OH professionals do. I have also been over to Dublin to the Irish SOM Presidential dinner since I strongly believe that SOMs are stronger together. In case you are not aware, the SOM central team are fantastic in supporting the important work that the Society does. We do, however, rely on our members to help us to navigate our journey to success. We are definitely 'better together' as Jack Johnson has sung about. If you have any questions, or contrary views, then please get in touch!



# SOM Occupational Health Awards

Join us in this celebration of the superb work that occupational health professionals undertake every day. The SOM Occupational Health Awards showcase occupational health – demonstrating the value of occupational health to organisations and the wider community.

#### **SOM Occupational Health Awards 2025 - closes 7th November!**

The awards will be presented at the SOM Christmas Drinks Reception at the Royal College of Physicians London on the evening of Wednesday 10th December - book your place <a href="here">here</a>. Categories:

- Outstanding Occupational Health Initiative
- Outstanding Occupational Health Practitioner
- Outstanding Contribution by an Employer to Workplace Health and Wellbeing, sponsored by <u>OH Assessment</u>
- Outstanding Occupational Health Team
- Outstanding Contribution to Diversity and Inclusion
- · Outstanding Contribution to the Development of OH Globally
- Outstanding Contribution to Occupational Health Research
- SOM Lifetime Achievement Award

The closing date for entries is **5pm Friday 7th November.** The Awards are **free to enter**. Rules of entry <u>here</u>. Please send your award submission(s) via <u>our online form.</u> We look forward to receiving your entry. If your company is interested in sponsoring an award, do contact us.

# Occupational Health Leadership Competency Framework

SOM has published a new <u>Occupational Health Leadership Competency Framework</u>. The framework provides a clear, practical, and aspirational guide to leadership development across the profession.

Aligned with the objectives of the <u>SOM Leadership Academy</u>, the framework aims to:

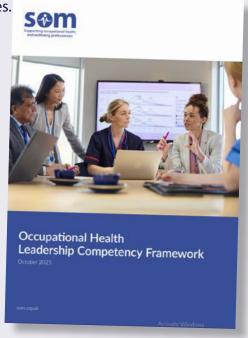
- 1. Develop leadership and management skills among OH practitioners.
- 2. Foster a pipeline of future leaders through development opportunities.
- 3. Promote diversity, equity, and inclusion in OH leadership.

As part of a wider ambition led by the SOM Leadership Academy, the framework recognises that leadership in OH is not limited to formal roles or titles – it is a shared professional responsibility that emerges across disciplines, sectors, and career stages.

Above all, the framework is a call to action: to recognise and invest in leadership as a core professional capability and to empower the next generation of OH leaders to shape a healthier future for all.

Download the new framework here.

All SOM publications are available to download from our <u>Publications</u> <u>Catalogue</u>.



Occupational
Health and Safety
Concerns in the
Artisanal and
Small-Scale Mining
Sector: A Review



A review of the challenges with rapid expansion of artisanal and small-scale mining, offering explanations as to why they have emerged, intensified over time and more importantly, not been tackled effectively. View the publication here. The French translation is available here.



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\*Exc. patient response switch



# The benefits of using Early Intervention of Workplace Mediation alongside OH and HR

By Liz Kendall, Everys Mediation Team

Having spent most of my career in law and healthcare, one phrase stands out as being pervasive in both contexts – early intervention. I advocate for the importance of early-stage health and wellbeing services for staff and its obvious benefits. Switching back to working in a law firm again has enabled me to combine this with educating employers about the benefits of early intervention of workplace mediation. There is an important link between these two types of early intervention.

In the medico-legal sector, the term early intervention of rehabilitation is frequently used by insurance companies and law firms alike to describe the quickest way for someone to make the best possible recovery. The sooner someone receives recommended treatment, the better the prognosis. Alternatively, the longer the delay in treatment, the longer the recovery.

The same principle can be applied to workplace conflict. All too often we hear of organisations ignoring the first signs of friction between employees, brushing the issue aside and hoping that it will go away. This is to the detriment of the employees both directly and indirectly in dispute. Starting with a decrease in productivity, periods of absence occur; stress and anxiety symptoms usually follow. Sometimes it is not until this point that the matter gets picked up by Human Resources/ Occupational Health. Perhaps a grievance is raised which may culminate into a disciplinary, dismissal, employment tribunal. This is far too late. The cost to the organisation of prolonged workplace conflict runs into thousands of pounds and the effect overall on health and wellbeing of employees can be devastating for the future of that company. A few years ago, Acas reported that the cost of conflict to UK organisations was approximately £28.5 billion per annum. This is unsustainable.

The organisation benefits from reducing absenteeism, retaining their key trained staff, and avoiding costly legal employment tribunal fees. This also creates a healthier, happier environment in which to work...

Which is where early intervention of workplace mediation comes in. Using an independent Workplace Mediator as soon as conflict is noticed by a member of staff can help the parties resolve their differences, exploring ways in which they can collaborate with each other. The service is both voluntary and confidential. The organisation benefits from reducing absenteeism, retaining their key trained staff, and avoiding costly legal employment tribunal fees. This also creates a healthier, happier environment in which to work and reduces the claims experience.

This service sits perfectly well within an OH offering as it does a Human Resources service. Very often OH is the first person to identify that an employee's ill health and/ or absenteeism is in some way caused or contributed to by an underlying workplace issue. A combination of



all three services helps to reduce down referral time, which in turn, helps to get the employee back to the workplace.

Early intervention of mediation effectively bridges a gap. It does not serve as a replacement for another service. It can stand alone or can be an additional step in the process of addressing conflict in the workplace either before or during referral to OH/HR. This helps to filter out those disputes between key members of staff that are capable of being rectified, preventing the matter from escalating into something from which there is no return. There are exceptions of course. Workplace mediation is not suitable for those matters where someone has been the subject of varying forms of harassment and/or violence. Ultimately, there will always be instances that start at grievance level and require the expertise of employment lawyers to assist throughout the process.

If we want to make a noticeable change, we must be open to having discussions with stakeholders to create a delivery solution that covers all eventualities. A professional pool of expertise, with the emphasis on early intervention, will help to make a noticeable reduction in the cost of workplace conflict and an improvement of the general health and wellbeing of employees.



Liz Kendall, Everys Mediation Team. Fellow of the Civil Mediation Council and Vice Chair of the Devon & Somerset Law Society's Mediation Panel. She champions early intervention and promotes mediation with Occupational Health, Human Resources, and wellbeing strategies.

### **SOM 90th Anniversary Gala Dinner**

SOM was born in a pub in London on 27th September 1935. Celebrations took place at the SOM 90th Anniversary Gala Dinner on 26th September at the Apothecaries' Hall, London. Take a look at our history in this special 90th anniversary booklet, compiled by Dr John Hobson and with contributions from past Presidents; current President (Professor Neil Greenberg) and former CEO (Hilary Todd). View the highlights from the night below and in the online gallery.





















# HR professionals underestimate role of OH in employee wellbeing, new YouGov survey reveals



Only 12% of HR professionals identify occupational health (OH) as one of the top factors contributing to employee health at work - despite evidence that OH underpins many of the wellbeing priorities they ranked more highly.

The findings come from a YouGov survey commissioned by the SOM ahead of Occupational Health Awareness Week (OHAW). The results highlight both the opportunities and risks facing UK organisations in how they use OH.

#### **Key findings**

Knowledge gap: Just 12% of HR professionals selected "access to occupational health" as a top four driver of good employee health. By contrast, 90% selected work-life balance, and 74% workplace culture. Yet OH can support many of these areas through proactive advice, early intervention, and evidence-based risk management.

Prevention opportunities overlooked: Only 42% of organisations use OH professionals to plan how to prevent ill health, even though prevention is central to reducing sickness absence, avoiding presenteeism, and cutting costs.

Presenteeism not addressed: Just 13% of HR professionals reported their organisation refers employees to OH to manage presenteeism - despite the £25 billion annual cost of presenteeism to UK businesses.

Awareness gap: 6% of respondents were unsure whether their organisation offered any OH support, and 18% were not sure when OH referrals were made.

Barriers: Encouragingly, more than a quarter (26%) of HR professionals reported no barriers to using OH. However, cost (22%) and lack of understanding of OH (13%) were cited as common obstacles faced by HR professionals when trying to further embed OH within their organisation.

"Whilst professionals value wellbeing, culture, and work-life balance, they do not appear to often recognise that effective OH underpins these priorities."

#### Call to action

Professor Neil Greenberg, President of SOM, said:

"These findings show there is still a significant gap in how occupational health is understood and used in UK workplaces. Whilst professionals value wellbeing, culture, and work-life balance, they do not appear to often recognise that effective OH underpins these priorities.

"SOM completely understand the pressures HR teams are under - juggling multiple demands, from recruitment to retention, employee relations, and wellbeing. It's not surprising that occupational health can sometimes be seen as just another service, rather than a strategic partner.

"By using OH proactively - especially for prevention and managing presenteeism - businesses can reduce absence, improve retention, and save money. Proactive use of OH means both early referral and taking advice from OH professionals about how to create healthy work environments. Unfortunately, if OH professionals are only consulted when a worker has highly complex health needs, finding effective solutions to return them to good health can be very difficult.

"Occupational Health Awareness Week 2025 is about reframing OH as a supportive partner to HR that has significant benefit beyond a service for longterm sickness management, helping organisations

deliver on their people priorities, not adding to their workload."

#### **Background**

Occupational health supports employees to stay well, remain in work, and return after illness. Research shows every £1 invested in OH returns up to £2.35 in reduced absenteeism and medical costs.

OHAW 2025 took place from 22nd–28th September as part of SOM's 90th anniversary year, under the theme "Occupational Health as a Strategic Partner to HR." Activities included webinars for HR professionals and targeted resources for HR leaders and employers.

Businesses and HR professionals can learn more at www.som.org.uk/ohaw

<u>Download our summary of the YouGov results here.</u>

### **Donate to The Society of Occupational Medicine**

SOM welcomes donations that help occupational health, our charitable purpose.

For our 90th anniversary, we are aiming to raise funds to support:

- Scholarship training e.g. for a Diploma in Occupational Health and Medicine or in Leadership to encourage clinicians to join occupational health and develop.
- Research for occupational health research in the UK and globally.

All donations will go to a restricted fund for these purposes.

Following the Golden Jubilee Appeal in 1975 (which raised over £80,000 for an annual travel fellowship), we hope to raise £90,000 in this anniversary year.

Please donate! Email <a href="mailto:finance@som.org.uk">finance@som.org.uk</a> with details of the donation. Your bank will provide you with a receipt as proof of payment. Please send to <a href="mailto:finance@som.org.uk">finance@som.org.uk</a> the date that you transferred your donation. This will help us keep track of your transfer and we can then let you know and thank you once we have received it.

Please state if you are a UK taxpayer, as we can then claim gift aid.







#### **SOM MEMBERS RECEIVE 10% DISCOUNT**



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- Broad Exposure: A vast reach of over 33,000 health contacts across social media





# SOM West Midlands Winter Dinner & Networking Evening



Friday 21st November

18:30 – 22:30

Lake Lounge Genting Arena Resorts World Birmingham, B40 1PU



• £45: SOM Members

£55: Non-Members

JOIN US FOR A DINNER BUFFET, DESSERT & AN EVENING OF NETWORKING WITH FELLOW PROFESSIONALS \*\*



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# Not Looking Back: From Military Nurse to Occupational Health Nurse

By Rebecca Preece, Senior Occupational Health Advisor

I studied to become a Nurse at Portsmouth University. Our cohort was unique as everyone was serving in the armed forces. We split our time between Portsmouth University, where we could wear civilian clothing, and Fort Blockhouse (in Gosport), where we wore military uniform.

I graduated and was posted to the Defence Medical Rehabilitation Centre (DMRC), Headley Court. I spent four years caring for wounded, injured and sick service personnel, many of whom sustained horrific injuries in Iraq and Afghanistan. Still in my early 20s, it was often a difficult and emotive place to work. But it was also rewarding to witness and be a part of numerous recovery journeys. I also spent four months working as an Aeromedical Evacuation Liaison Officer in Kuwait, where I ensured the safe and swift passage of wounded, injured and sick service personnel from Op Telic. I have many fond memories of my time at DMRC and encountered some wonderful opportunities, such as escorting a teenage brain-injured soldier to Clarence House, where he was presented his Op Telic campaign medal by the then Prince Charles; I had to explain to HRH that the soldier could only communicate by drawing pictures due to his injury.

In 2009, I was posted to RAF Waddington, and subsequently Gibraltar, RAF High Wycombe, and RAF Halton, before being medically discharged in 2019. In early 2020, whilst working as a civilian practice nurse with the Army, I saw a Band 7 post for a Travel Health and Immunisation Nurse Specialist working at Public Health England within their in-house occupational health team. My dream job! I had experience with travel health and immunisations, as a big part of my role as an RAF practice nurse was ensuring service personnel were fit to travel anywhere in the world, often at short notice. I was successful with my application, and on 1st April 2020, the first day of the COVID-19 pandemic lockdown, I joined the team.

I work in a diverse occupational health team of clinicians and admin support staff, where there is a wealth of knowledge and experience. We have a mix of remote-based Senior Occupational Health Advisors (SOHA), and site-based clinicians. I work at Porton Down, a big, world-renowned scientific campus. I feel a bit like Penny from the TV show 'The Big Bang Theory,' as I work alongside the amazing brain power of talented scientists and researchers.

It was a steep but exciting learning curve as the new role involved much more than travel health and immunisations. I realised that I had many transferable skills from my previous nursing roles. With support and mentorship from my colleagues, I was soon assessing pre-placement health questionnaires, carrying out new starter health assessments, taking occupational health screening bloods, carrying out skin and respiratory health surveillance, alongside my travel health and immunisation tasks.

In 2022, I started doing case management, something that I love. I feel like I am making a difference to the health and wellbeing needs of our employees. I remember a case where an employee was referred with depression and anxiety, which was impacting his work. When I first spoke to him, I could tell that he was in a really dark place from the tone of his voice and what he told me, which ultimately led to a period of sickness absence. Over a period of weeks, and after several appointments, I could hear the difference in his voice and knew that he was getting better and was dealing with his demons, which allowed him to return and remain in work.

Fast forward to 2025, and I am now a SOHA within the team, having successfully passed the Diploma in Occupational Health Practice. The last 18 months have been busy as, alongside studying and working full-time, I have two school-aged daughters, and in February, after 12 months of intensive training, I competed at the Invictus Games Vancouver Whistler and won a bronze medal in skiing, and competed in skeleton and indoor rowing!

Moving into occupational health is the best career decision that I have ever made; I work in a fantastic and incredibly supportive team that has encouraged me to pursue my dreams. For anyone considering a career in occupational health who is doubting themselves as they do not think they have the skills, I encourage you to try it!



Rebecca Preece is a
Senior Occupational
Health Advisor, BSc,
Dip HE, RN(Adult),
DipOHPrac, working
for the UK Health
Security Agency
Division of Workplace,
and Health and Safety
People and Workplace
Directorate.

# Losing a Career for the Sake of Changing a Light Bulb

By Rachel Mitchell, LightAware Charity

Marcus was a Management Consultant in a top UK consulting firm, a well-paid and fulfilling career spanning two decades. Despite pursuing a healthy lifestyle and having no existing health conditions, Marcus' career was ended by the installation of LED office lighting. Within a week he experienced symptoms of intense 'head pressure,' not relieved by painkillers, nausea, and an overwhelming sense of needing to 'escape' the new lighting. The symptoms worsened until Marcus had to cease working. The firm reluctantly acknowledged this was a light-sensitivity disability related to the installation of LED lighting, and occupational health was asked to propose Reasonable Adjustments.

The obvious solution would be to revert to traditional office lighting using alternatives to LEDs. For Marcus, and thousands like him, this is an entirely avoidable disability. Light-sensitive people could rejoin the workforce but for the availability of an alternative to LED lights. Without alternatives, occupational health is unable to support the growing number of people suffering from the effects of ubiquitous LED lighting in offices and homes.

Healthy people are forced into the disability benefits system because there is nowhere else to turn. Employment in LED-free environments is increasingly rare, and people like Marcus are pushed out of their career.

#### Light-sensitivity is a known problem

In 2008, the EU's Scientific Committee on **Emerging and Newly Identified Health Risks** (SCENIHR) estimated that there were around 250,000 individuals in the EU with underlying photosensitivity conditions. However, the report used narrow definitions of photosensitivity and excluded light sensitivity suffered by people with ME, migraine, autism, and other neurological conditions. The Spectrum Alliance of health charities estimated that over two million in the UK were potentially affected by the phase-out of incandescent light bulbs, based on data supplied by relevant charities and support groups. Even these figures do not include the occurrence of light-sensitivity in previously healthy individuals, like Marcus. In 2017, the European Commission's Scientific Committee on Health, Environment and Emerging Risks (SCHEER) published a report about the potential health risks of LED lighting. It concluded that current research does not provide evidence for health hazards to the eyes or skin, but acknowledged 'issues of flicker, dazzle, distraction and glare' and the lack of long-term research, making continued monitoring important. The



charity LightAware challenged SCHEER's statement that 'there is no evidence of direct adverse health effects from LEDs in normal use by the general population' because it omitted to mention that 'general population' excluded the young, the elderly and vulnerable groups including the light-sensitive - one third of the overall population.

#### Solutions exist in law, but not in reality

In 2018, following campaigning by LightAware, a 'photo-sensitivity' exemption was incorporated into the EU Single Lighting Regulation, and brought into UK law. This exemption enables continued access to incandescent light bulbs for those who need them. Unfortunately, this exemption has not been adequately implemented by the government. The installation of LED lighting has resulted in the exclusion of light-sensitive people from society.

There is a caseload of employees placed on long-term sick pay as a result of employers lighting choices, and this will only increase. The human cost of this decision is playing out across the country, with many people now economically inactive as a result of an inflexible lighting policy. Occupational health advisors are asked to propose Reasonable Adjustments, yet without a systemic approach to disability inclusion it is left to individuals to advocate for individual accommodations. In reality, there are no Reasonable Adjustments to recommend, without inclusion of the light-disabled considered at the Building Regulations level, as was done for wheelchair users.

While there are no easy answers, it is vital to recognise light-sensitivity as an issue, and that its triggers are from changes to the working environment. LightAware campaigns for long-term research into the impact of LEDs on health, and support from occupational health is invaluable.

Lives should not be ruined by a choice of light bulb; safe lighting should be a human right.



# From Cotton Mills to ChatGPT: Ninety Years of Keeping Britain Well at Work

By Amy McKeown, Workplace Health Strategy Consultant



When the Society of Occupational Medicine (SOM) began in 1935 (then known as the Association of Industrial Medical Officers), Britain was powered by mills, mines, and shipyards. Coal dust coated lungs, machinery mangled hands and long shifts were routine. A handful of doctors believed work should sustain life, not shorten it, and set out to work together to demonstrate that healthy workers build a stronger nation.

SOM members supplied evidence to government committees implementing the Factories Acts. After the Second World War, the NHS unfortunately did not embed occupational health services for people of working age, believing that employers should take that responsibility.

Post-war boom challenges included: chemicals, asbestos, industrial noise. SOM physicians produced the research that set exposure standards and informed the Robens Committee, whose work shaped the Health and Safety at Work Act of 1974.

The service economy of the 1980s and 90s shifted risks again. SOM documented the rise of repetitive-strain injuries and was among the first to link workplace stress and mental health, decades before "wellbeing" became a boardroom word.

These milestones prove a constant truth: prevention pays. Yet Britain again faces a health-at-work crisis. The latest CIPD research finds employees averaging 9.4 sick days a year, up from 5.8 before the pandemic. Only 31 per cent of employers use occupational health proactively and barely 29 per cent involve it in health strategy. Sir Charlie Mayfield's Keep Britain Working review warns that

ill-health inactivity could add 25 billion pounds to the welfare bill by 2030.

Now we enter SOM's ninetieth year with another industrial-scale shift. Artificial intelligence is reorganising work itself, erasing some careers, creating others, and handing decisions once made by people to algorithms. When steam power transformed Britain, it triggered the labour movement, modern employment law, and the birth of occupational medicine. Al will demand a similar leap: new standards and protections for workers whose roles and organisations may change as fast as the technology. Digital surveillance, algorithmic workloads, and the erosion of stable career paths pose fresh risks to mental and physical health that only a forward-looking occupational health system can meet.

The Government's Employment Rights Bill, with its promise of day-one sick pay, is welcome but treats symptoms, not causes. The next step must be universal, early access to occupational health - what some have called a National Occupational Health Service - so every worker, from coder to care-home cleaner, can see an expert before illness forces them out of work.

We invite employers, HR leaders and policymakers to act now: commit to early occupational health referral in every organisation, support a national pathway to universal access and access resources to learn how. Healthy work is not a perk; it is the infrastructure of a thriving economy. The next revolution in workers' rights starts with using occupational health earlier and at every level.

### Improving the health of Artisanal and Small-Scale Mining workers and communities

By Rose Wood, SOM International Coordinator

100 million people work in the informal mining sector worldwide, using basic tools to extract minerals and metals, often without proper equipment. There is little separation between living and working areas, miners and their families are exposed to pollutants and toxic hazards, leading to potentially fatal illnesses such as silicosis, tuberculosis, chronic respiratory and cardiovascular diseases.

A new project, coordinated by the International Occupational Medicine Society Collaborative (IOMSC) and SOM is under way to examine how to improve the health of people who work and live in these mining communities.

IOMSC are partnering with occupational health (OH) and mining leads in four countries – Professor Dingani Moyo in Zimbabwe, Dr Maria Borda in Colombia, Carlos Henrique in Brazil and Dr Deogratias Sekimpi in Uganda. Ethics approval and data collection for this project is well underway, guided by the literature review and survey instruments created by the project's Academic Lead, Professor Gavin Hilson at the University of Surrey. The literature review will guide the next steps for the project.

IOMSC site visits have taken place to the four partner countries. These visits build 'on the ground' relationships with miners and local stakeholders, understanding the contextual nuances, and advocating for miner's OH with local and national leaders.

IOMSC Co-Chair Dr Richard Heron joined our lead partner in Brazil, Dr Carlos, for site visits around Araçuaí Minas Gerais. He presented the project's goals to local mining leaders and discussed data collection, which will begin next month. Together, they attended six meetings with cooperatives as well as visiting a hospital and two basic health units. See photos above and below. Dr Carlos stated that, "Implementing the project in Brazil is very important and emphasises health and safety aspects often overlooked in the ASM sector, while fostering a bottom-up vision to design strategies for mitigation and more responsible practices."

SOM CEO, Nick Pahl, visited Zimbabwe in July. He briefed the ILO Country Director and team, WHO and representatives from the British Embassy raising awareness and progress with the project. He visited the sites where data was being collected by the research team. Initial results highlighted the health risks of silicosis (TB and HIV compounded) and mercury poisoning for the half a million plus ASM miners. Some of the key challenges faced by ASMs is the lack of specific screening services for those exposed to occupational hazards such as silicon dioxide, mercury and other chemicals.







Nick also visited Colombia earlier in the year to strengthen relationships with officials, including Choco State authorities, the ILO and nationally at the Colombian Occupational Medicine Conference in Bogota.

Dr Kabir Varghese, an occupational medicine trainee, is finally carrying out a site visit to Uganda in October to assist the team with data collection, as well as meet with representatives from the British High Commission in Kampala, and other stakeholders. Following initial field visits, Dr Deogratias commented that, "As expected, Artisanal and Small-Scale Mining in Uganda has been observed to have a wide range of hazards, but with limited preventive interventions in place at the moment. Hence a massive educational and practices change intervention of this project will be very pertinent."

The qualitative data gathered will contextualize the nuances of the sector in each country and guide the development of a second phase focusing on implementation and advocacy.

SOM and IOMSC continue to work to raise awareness and advocate for improved OH in the ASM sector internationally, at events such as a Thought Leaders' Summit during the World Health Assembly week at the ILO in Geneva and the SOM/ FOM Conference International Session.

SOM is grateful for the continued guidance of mining and OH experts through the SOM Mining Special Interest group and expert steering group.

We are grateful to NEBOSH for their generous funding of this project and their ongoing support.

For further information about the project, please contact rose.wood@som.org.uk



### **Occupational Health News**

- ◆ Call for a national occupational health service The Fabian Society <u>report calling for a national occupational health service</u>.
- ◆ Silicosis from engineered stone see this <u>Silica Dust Awareness Tool</u>.
- ◆ Recruitment exercise for non-legal members of the Employment Tribunal (England & Wales) - details here.
- ◆ Understanding Occupational Health provision: Government research updated findings from a 2019 survey on OH provision, see <a href="here">here</a>.
- ◆ Employing disabled people and people with health conditions new Government guidance <a href="here">here</a>.
- ◆ TUC review into role of employers in health and disability "Occupational health services also play a vital role in supporting working people who have health conditions to stay in, and return to, employment. This is a further area where public investment is urgently needed to expand provision, improve quality, and address the significant workforce shortages in occupational health itself". Read the review here.
- ◆ Learning Together: Employee Health and Wellbeing Round Table the Bevan Commission with Healthy Working Wales and CBI have produced a practical best practice guide with digital links to useful sites and resources for employers to support employee health and wellbeing in the workplace. Access in English <a href="here">here</a> and in Welsh here.

### **Upcoming SOM Special Interest Groups (SIGs)**

- Clinical Audit Friday 7th November, 11.30am
- NIHL Thursday 13th November, 3pm
- Academic Forum Friday 14th November, 12pm
- MSK Tuesday 18th November, 1pm
- Sleep Monday 24th November, 1pm
- Portfolio Monday 1st December, 4.30pm
- Pensions Tuesday 2nd December, 11am

- DOcc Med Tuesday 2nd December 4pm
- **Neurodiversity** Tuesday 9th December, 3.30pm
- Drug and Alcohol Thursday 8th January, 3pm
- Mental Health tbc contact SOM for details
- New Transport contact SOM for details
- Nuclear Ionising Radiation on invitation contact SOM for details

Interested in joining? Contact Nick.Pahl@som.org.uk



### **Mentoring into Occupational Health**

# Are you a registered health professional interested in a move into Occupational Health?

SOM and the NSOH are hosting a free mentoring service for those considering a move into a career within Occupational Health. The service is committed to fostering growth, instilling confidence and nurturing success. Our mentors are trained and experienced professionals within the multidisciplinary team of OH.

Use of the mentor service will enable you to explore and understand a career in Occupational Health.

We will help you to decide if this is the career for you and if so, support your transition with all the tools you need.

From background reading to CV and interview skills, our mentors provide guidance individually, in group sessions or both.

As a mentee you will receive a set number of sessions with your choice of mentor plus access to group mentoring.

#### **Benefits of mentoring include:**

- Provision of an understanding of OH.
- Reliable information and resources to prepare and upskill.
- Identifying transferable skills.
- An understanding of the task requirements within OH and varying delivery mechanisms.
- Signposting to shadow opportunities.
- Building confidence for a move.
- Widening professional networking within the specialty with the introduction to membership and networking groups.
- Advice on further training and education within OH
- Improving the chances of obtaining a role in OH with CV and interview skills.

Find out more at <a href="https://ohcareers.info/">https://ohcareers.info/</a>



What a brilliant platform this is, especially for new people wanting to get into OH

Lauren Widdowson (Registered Nurse)











Supporting occupational health





# Upcoming Workplace Visits







SOM plans regular workplace visits as part of the benefits of being a member, offering hands-on learning and insight into industry-specific occupational health strategies.

Members visited the Bremont Watch Manufacturing Centre in September (photos above). The company employees 160 people globally, ranging from in house marketing, finance and product development to manufacturing, watchmakers, and retail staff. It was a fascinating visit where members gained an understanding of the company's operations and approach to staff health and wellbeing. For access to our workplace visits, join SOM as a member.



Visit to Geevor Tin Mine & Lunch

Wednesday 5th November, Cornwall

WORLD of WEDGWOOD

Factory Visit to World of Wedgwood & Afternoon Tea

Wednesday 18th February 2026, Staffordshire



## Join SOM as a Professional Partner Member

# Work in HR, Wellbeing, Occupational Health Procurement, Employee Assistance or responsible for workplace health?

SOM Professional Partner Membership is for professionals who wish to keep up to date with the latest occupational health resources and guidance. Membership offers knowledge, tools, and connections to help you do the best job you can for your employer and your clients in health and work – now and in the future. It is not open to occupational health or other health professionals.

#### Benefits include:

- A curated monthly update with key resources and guidance
- Discounts on SOM events including up to 6 free webinars a year
- Exclusive workplace health offers
- Invitation to the SOM Christmas drinks and Awards

Whether you work in HR, or are a professional navigating health challenges, SOM's Professional Partner Membership helps you keep up to date with key issues,



from Long COVID to mental health at work.

With SOM's support, and the backing of a community of nearly 2,000 occupational health professionals around the world, Professional Partner Membership will boost your confidence and skills, helping you in your work and career.

Cost – £60 / year (saving you over £120 on webinar registration fees alone). Our membership year runs from January to December. If you join mid-year, you will pay a pro rata rate.

Membership shows a commitment to workplace health and a wish to understand current best practice; but is not an endorsement by SOM of the services you may offer and does not provide SOM membership voting rights.

For further information, please contact membership@som.org.uk



### Tuesday 18th November, 12 noon

### **Register here!**



# HOW TO OPTIMISE YOUR CV, INTERVIEW AND SOCIAL MEDIA SKILLS WEBINAR

to optimise your CV, interview skills and how to make yourself known on social media.

#### Speakers include:

Tracey Regan – PAM Group Ellen Harris – OH Medical Jo Vallom-Smith – OTs Priya Kanji – OH staffing Rachel Lelliot – Health Partners If you wish to enter the Occupational Health/Medicine specialty, it takes more than just sending in a CV or answering an advert...

It takes initiative and drive to get that first step.

This webinar aims to provide guidance on what is essentially a skill in today's marketplace.

### **Upcoming SOM Webinars**

View our catalogue of public webinar recordings here.

View the full list of upcoming SOM webinars here.

Heat Stress

**FREE For All** 

Tuesday 11th November, 3–4pm – Register here

Interviews, CVs and social media use for those getting into OH

FREE SOM Members: £35 Non-members

Tuesday 18th November, 12–1pm – Register here

Enabling older workers to stay and return to work

**FREE For All** 

Tuesday 25th November, 2-4pm

Supported by the Centre for Ageing Better – Register here

Work, Art and Health: A Journey Through Time

**FREE For All** 

Wednesday 3rd December, 4–5pm – Register here

Artisanal and small-scale mining

**FREE For All** 

Tuesday 9th December, 2–3pm – Register here

Launch of the Leadership Competency Framework

**FREE For All** 

Monday 26th January, 12–1pm – Register here

Neurodiversity, COVID and overlap with hypermobility and inflammatory conditions

FREE SOM Members; £35 Non-members

Wednesday 18th February, 4–5pm – Register here





#### **About the SOM**

The Society of Occupational Medicine (SOM) is the largest and oldest national professional organisation and with an interest in OH. It demonstrates a commitment to improving health at work, supports professional development and improves future employability enhancing our members' reputation and employability. Members are part of a multidisciplinary community – including doctors, technicians, nurses, health specialists and other professionals – with access to the information, expertise and learning needed to keep at the forefront of their role. Members benefit from career development opportunities alongside practical, day-to-day support and guidance, through local and national networks that are open to all. Through its collective voice, SOM advances knowledge, increases awareness and seeks to positively influence the future of OH.



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